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## UTILITY

Attorney Docket No.	1263.0899	רי בי		
First Named	l Inventor or Application Identifie	44		00
DAVID ELWORTHY		"[		3/
Express Mail Label No.		9/5		2/3
	Assistant Commissioner for		10	•

	B PATENT APPLICATION	First Named Inventor or Application Identifier			
	TRANSMITTAL	DAVID ELWORTHY			
	. (Only for new nonprovisional applications under 37 CFR 1.53(b)) ហ	Express Mail Label No.			
	TO APPLICATION ELEMENTS  See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:  Assistant Commissioner for alent  Box Patent Application  Washington, DC 20231			
	1. Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. Microfiche Computer Program (Appendix)			
	2. X Specification Total Pages 38  3. X Drawing(s) (35 USC 113) Total Sheets 6  4. X Oath or Declaration Total Pages 1	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Copy  b. Paper Copy (identical to computer copy)  c. Statement verifying identity of above copies			
١	a. Newly executed (original or copy)	ACCOMPANIANO APPLICATION PARTS			
The state of the s	b. X Unexecuted for information purposes  c. Copy from a prior application (37 CFR 1.63(d))  (for continuation/divisional with Box 17 completed)  [Note Box 5 below]  i. DELETION OF INVENTOR(S)  Signed Statement attached deleting inventor(s) named in the prior application, see  37 CFR 1.63(d)(2) and 1.33(b).  5. Incorporation By Reference (useable if Box 4c is checked)  The entire disclosure of the prior application, from which a copy of the eath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	11. X Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations  12. Preliminary Amendment			
۱					
	17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:  Continuation Divisional Continuation-in-part (CIP) of prior application No/				
ļ	18. CORRESPONDENCE ADDRESS				
	X Customer Number or Bar Code Label (Insert Customer No. or Altach bar code label here) or Correspondence address below				
	NAME				
-	Address				
t	City State	Zip Code			
	Country Telephone	Fax			
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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	40*-20 =	20	X \$ 18.00 =	\$360.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	4-3 =	1	X \$ 78.00 =	\$ 78.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$260.00 =	\$260.00
				BASIC FEE (37 CFR 1.16(a))	\$690.00
	-		Total of	above Calculations =	\$1388.00
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	1.27, 1.28).	0
				TOTAL =	\$1388.00
a b c	A small er and desire	ntity statement is enclose ntity statement was filed i d. er claimed.		al applicațion and su	ch status is still proper
20.	X A check in the amo	unt of \$ <u>1388.00</u>	to cover the filing fee is	enclosed.	
21.	A check in the amo	unt of \$ to c	cover the recordal fee is	enclosed.	
22. T	The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:				
а	X Fees requ	ired under 37 CFR 1.16.			
b	X Fees requ	ired under 37 CFR 1.17.			
C.	Fees requ	ired under 37 CFR 1.18.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	LEONARD P. DIANA	
SIGNATURE	2-18-2. 4.46	
DATE	February 22, 2000	

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